

WHO BURIED THE BUDS

Selective Slaughter
soars high :

The story of female
Foeticide/infanticide



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The story of
female foeticide / Infanticide

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Lalitha



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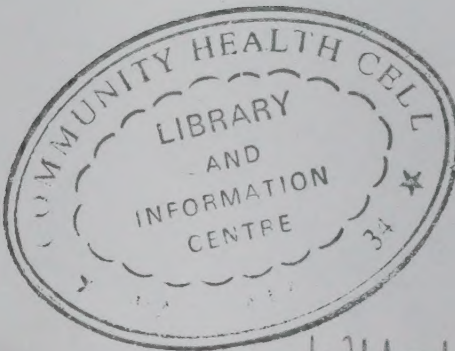
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POS

A New Millennium facing the Girl Child

Factors responsible for the increasing
incidence of girl children

1. Poverty and cultural practices the leading cause of girl children

2. Child labour and prostitution the leading cause of girl children

3. Child marriage the leading cause of girl children

4. Neglect and abandonment the leading cause of girl children

5. Violence against women and girls

6. Abuse of children and women

Diagnostic methods used

Doctors find the child labour and prostitution

Certain major agencies are involved in the fight against selection abortion

Do Women really have a choice?

Let us let Women's Choice not lead to girl children

Actions against the act of selection abortion

Multi-pronged action is needed

Dedicated to

All the Women

Who are pitting a fight

individually and collectively

on two fronts

for the means to safeguard

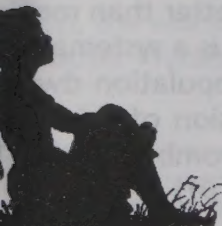
a female fetus

against selection abortion

and for the right to safe abortion

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1

A New Millenium minus the Girl Child

For the little ones which happen to be females whether at the conception stage, fetal stage, soon after being born or as a small child, still there is every chance of being eliminated. This is no hypothesis. It is the naked reality around. Thousands of female foetuses are being dumped into the drain through modern means. Infants are killed using different methods. Babies are left to die through gross ill treatment or neglect. The entry of the girl child into the world is often undesired. It is literally prevented, restricted. People have been usually saying that it is all a man's world. Women have been made to feel it in a dozen ways. But now is there an effort to literally make it so? Can there be a world without women? Can there be children? Can there be human life at all? Like the picture foreseen in 'Future Shock' by Alvin Toffler it is a gradual attempt to have enough women for desired type of procreation alone apart from other services.

'Future Shock' a famous book, Alvin Toffler goes to describe about a possible future society where all people could be produced like commodities, for various services, depending on need.



“A study conducted by the United Nations Statistical Office and population division points out that the declining sex ratio in India suggests that it is an exception to the global rule of girls surviving better than boys owing to their biologically stronger constitution. In most countries the sex ratio tends to be in favour of women with an average of about 1050 women for every 1000 men..In India, on the contrary, there are only 930 women for every 1000 men in the population.

”

This has resulted in a rather distressing and shameful fact of some 40- million girls and women 'missing'. They are just callously eliminated from the Indian population.

Studies have shown that where men and women have equal access to nutrition and health care women certainly survive better than men and live longer. In fact it is only in societies where there is a systematic and specific discrimination against women that their population dwindles down. Declining child sex ratio is a glaring expression of this violent discrimination against the feminine gender, from womb to tomb. The Lowest sex ratio is in fact found in India. (Refer Table 01)

Table 01

Women per 100 men in various Countries

Europe & North America	105
Latin America	100
Caribbean	103
Sub Saharan Africa	102
South East Asia	100
Central Asia	104
South Asia	95
India	93

Source: *The World's women - Trends and Statistics*, United Nations, NY, 1995

In fact there is an official admission to the fact that "it is increasingly becoming a common practice across the country to determine the sex of the unborn child or foetus and eliminate it if the foetus is found to be female. This practice is referred to as pre-birth elimination of female (PBEF). PBEF involves two stages: Determination of the sex of the foetus and induced termination if the foetus is not of the desired sex. It is believed that one of the significant contributors to the adverse child sex ratio in India is the practice of female foeticide" (Source: Office of the Registrar of General and Census Commissioner, India, Ministry of Health and Family Welfare).

The child sex ratio (CSR) in India has been indicating a negative trend towards girl children for decades now. The sharp decline in CSR from 947 in 1991 to 927 in 2001 as brought forth by the 2001 census hit the public eye. (Refer Table 02)

Decline in CSR is an avowed expression of the devalued and vulnerable, oppressed status of women, with even the female foetuses not spared.

et us take a closer look at the child sex ratio in different states. It becomes apparent that large declines between 1991-2001 have occurred mainly in Punjab, from 875 in 1991 to 793 in 2001 in 0-6 age group, the worst record in India) Haryana, Himachal Pradesh, Gujarat, Maharashtra,



Table 02

Population in the age group 0 to 6 years in 2001, India

Infants and Children - all	15.8 Crores
Male infants and children	8.2 crores
Female infants and children	7.6 crores
Deficit of female infants and girls	60 lakhs
Sex ratio of child population	927

Source : Census of India, 2001

Chandhigarh and Delhi. All these are relatively well developed. Fall in child sex ratio in above states mainly points towards rampant practice of female foeticide along with certain amount of infanticide as elsewhere. (Refer Table 03)

Female Foeticide amounts to the elimination of the girl child right at the foetal stage after determining the sex through varied diagnostic methods. These methods are easily available in any of the unscrupulous genetic clinics and so called counseling centers. Such clinics and centers have mushroomed under varied names in cities and towns. It is mainly the middle class, lower middle class and elite sections which resort to this practice owing to strong patriarchal notions, small family norm etc., In poor households in rural and urban areas it is primarily poverty coupled with patriarchy that drives them towards female infanticide. Female Infanticide amounts to the killing of the child soon after it is born through varied crude means.

Table 03**Female Sex Ratio and Child Sex Ratio (State/UT wise)**

Sl. No	States	Sex Ratio (overall population)		child sex ratio (0-6 years)		Decline/Increase of CSR2001 Over CSR 1991
		1991	2001	1991	2001	
1.	Punjab	882	874	875	793	-82
2.	Haryana	865	861	879	820	-59
3.	Chandigarh	790	773	899	845	-54
4.	Himachal Pradesh	976	970	951	897	-54
5.	Jammu & Kashmir	896	900	NA	937	-
6.	Delhi	827	821	915	865	-60
7.	Rajasthan	910	922	916	909	-7
8.	UP	876	898	927	916	-11
9.	Bihar	907	921	953	938	-15
10.	Orissa	971	972	967	950	-17
11.	Madhya Pradesh	912	920	941	929	-12
12.	Uttaranchal	936	964	948	906	-42
13.	Jharkhand	922	941	979	966	-13
14.	Chhattisgarh	985	990	984	975	-9
15.	Sikkim	878	875	965	986	+21
16.	Arunachal Pradesh	859	901	982	961	-21
17.	Nagaland	886	909	993	975	-18
18.	Manipur	958	978	974	961	-13
19.	Mizoram	921	938	969	971	+2
20.	Tripura	945	950	967	975	+8
21.	Meghalaya	955	975	986	975	-11
22.	Assam	923	932	975	964	-11
23.	West Bengal	917	934	967	963	-4
24.	Gujarat	934	921	928	878	-50
25.	Daman & Diu	969	709	958	925	-33
26.	Maharashtra	934	922	946	917	-29
27.	Andhra Pradesh	972	978	975	964	-11
28.	Karnataka	960	964	960	949	-11
29.	Goa	967	960	964	933	-31
30.	Lakshadweep	943	947	941	974	+33
31.	Kerala	1036	1058	958	963	+5
32.	Tamil Nadu	974	986	948	939	-9
33.	Pondicherry	979	1001	963	958	-5
34.	A & N Islands	818	846	973	965	-8
	All India	927	933	945	927	-18

Source: Census of India 2001, series 1, paper-1

Table 04

Infant Mortality Rate (IMR) and Age Specific Death Rate (ASDR) in the age group of 0-4 and 5-9 by gender in India for the year 1998.

YEAR	IMR		ASDR (0-4)		ASDR (5-9)	
	M	F	M	F	M	F
1998	70	73	21	24.1	2.1	2.4

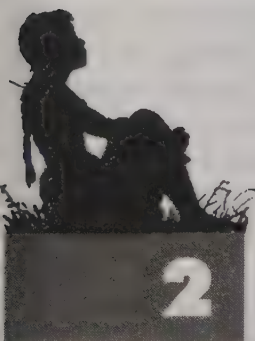
In both cases feudal and imperialist economic, social, cultural systems boost up the phenomena to serve its own ends. The government, which is a guardian of the system, acts as a spectator. It has been enacting toothless laws at the insistence of activists who take up cudgels against the barbaric practice of doing away with foetus and infants simply because they happen to be female. A number of doctors and nursing homes have availed both this rush to detect the gender of the foetus and then to destroy it if it is female, to quickly pile up wealth. Women who are often more victims than willing participants in the crime cannot speak about it. Men/families who encourage or coerce the women into it remain behind the screen. Doctors who abet the crime hush up the whole matter. Thus hardly any statistics is available regarding the actual number and extent of female infanticide increasingly occurring in this country. Incidence of Female infanticide also far exceeds the available data.

And now Child Mortality Rate (CMR), Infant Mortality Rate (IMR) and Child Sex Ratio (CSR) have come to speak voluminously on the crime. The decline in CSR should also be attributed to IMR, and CMR, which are higher when it comes to girl children. (Refer *Table 04*) This is owing to gross neglect in terms of basic food and health care for girl children. The role of sexual violence on girl children cannot be overlooked either.

Female infanticide was underlined as the most heinous crime against women in India

during Beijing conference by the Indian State and NGO agencies. Common people especially poor rural women were held as the main culprits. It was the highlight of all pep talks on women by the politicians who did not care to go into the fundamental reasons behind such episodes. Not much was said about female foeticide either, that was a much more booming business entailing large profits and spreading like an epidemic.

There is a widespread use of sex determination and sex preselection tests throughout the Country (including Kerala). There is also a high rate of Female Infanticide in the BIMARU States (Bihar, Madhya Pradesh, Rajasthan and Uttar Pradesh) apart from rural Tamilnadu and Gujarat, Punjab, Haryana, Himachal Pradesh etc. have gone far ahead now in the race against female foetus. On the whole millions of girls have been missing in the post independence period. Some 70 districts in 16 States and Union Territories have recorded more than a 50-point decline in the child sex ratio in the last one-decade.



Factors responsible for the systematic elimination of girl children

For all social phenomena, if they have to continue and spread there is always an economic basis. There is a larger political dynamics. There is a wider social sanction. There is also a cultural dimension. The socio-cultural factor predominantly operates within the prevailing exploitative feudal and capitalist political and economic framework. And patriarchy is the common refrain, the precipitating factor in any oppressive phenomenon pertaining to women. Let us take the large-scale phenomena of Female foeticide and Infanticide here. The Child Sex Ratio (CSR) is low in backward, feudal Rajasthan or in 'agriculturally advanced' Punjab and Haryana or in relatively 'industrially advanced' Gujarat or Maharashtra, as statistics indicates. In all the above it is patriarchy that holds sway protruding its ugly face from both feudal and capitalist platforms. It has led to an erosion of girl children born and unborn.

The overall sex ratio is seemingly favourable to women in Kerala. Male migration to Arab countries is said to be one of the reasons leading to such a positive picture. Probable, for look at the child sex ratio between 0-6 age group population was 36.5 lakhs. Of this 18.6 lakhs were male infants and babies. 17.9 lakhs were female infants and babies. This means roughly 79,760 female infants and babies were missing in 2001 in Kerala. This can be only seen as a result of sex selective abortion of female fetuses using varied techniques.

i. Society and culture sanction the killings of girl children

The fact remains that the living conditions of women in general and young girls in particular have deteriorated over time. A vast majority of women have a lowered status in family and society. Necessary medical attention is often delayed or denied. Negative attitude towards women's health is a major reason for mortality and morbidity during childbirth and low weight of babies. Even when it comes to breast feeding, supplementary nutrition and adequate care a girl is discriminated. It is believed that while it is enough to breast feed a girl child for six months, a boy requires far more. They lack opportunities for education and employment. They are denied a share in property. They have no access to any resources. Bound by highly discriminative and exploitative social and cultural norms women fall a prey to a host of indescribable sexual abuse, physical and mental violence. They labour more, often eat lesser and the returns are always poor. Ultimately women who are the producers and creators of much value including human beings are seen as and made to see themselves as worthless burden, a use and throw commodity under the rule of patriarchy. Consequently an unfair, illogical and unreasonable demand for male offspring has also ensued. (Refer Table 05)

Female foeticide and infanticide are a manifestation of gender bias. There is a common saying that bringing up a girl is like watering the neighbour's plants. Sons are considered an asset while daughters are treated as a liability. A son under patriarchal culture is favoured, for he is viewed as the saviour of the family, the carrier of the lineage, the customary performer of the last rites, the inheritor of wealth if any, etc. The daughter on the other hand is viewed as a financial burden what with dowry and marriage expenses and a security problem as violence on her abounds.

There are a number of proverbs and folk songs indicating a son preference and death wish for daughters. Some popular Bihari folksong runs like this; 'Had I known that the foetus was that of a girl, I would have had a drink of hot chillies and killed not only the foetus but this life long curse'. Another says 'The lunar eclipse occurs at night, the solar in the day. Eclipse brought out by the birth of a daughter lasts forever'. On the contrary fertility songs welcomes a son saying 'May you have a long life, your birth has brought prosperity and wealth. You are the light of the house. Our dream is to be fulfilled'.

There is a belief in Bihari society that with the birth of a girl the earth goes down by a few yards, whereas the birth of a son raises its position. Similarly the father is asked to take off his pagadi (turban) because with the birth of a girl humiliation and misfortune have entered the house. He should prepare himself for this bad omen. There are songs to lament. Son preference, an offshoot of patriarchy, in fact is deeply embedded in Indian culture. (Refer Table 06)

Table 05

Survey indicating that in each group of children between 0-18 girl count is lower than boys. Survey undertaken by community workers of MYRADA and Child Survival in Najafgarh and Alipur blocks.

	Total	Boys	Girls	Sex Ratio
0-6 years	4696	2607	2089	801
7-12 years	2875	1580	1295	810
13-18 years	775	431	344	798

Table 06

Index of son preference in Major States in India 1990

States	Index of Son Preference*	Rank
Andhra Pradesh	13.8	11
Bihar	24.5	4
Gujarat	23	6
Haryana	14.3	10
Karnataka	20	8
Kerala	11.7	12
Madhya Pradesh	27.1	2
Maharashtra	18	9
Orissa	23.4	5
Punjab	20.3	7
Rajasthan	25	3
Tamilnadu	9.2	13
Uttar Pradesh	21.6	1
West Bengal	14.3	10
All India	20	

Index of Son preference = 100 (E/C)

Where E = the excess number of sons over daughters considered ideal

C = the ideal family size.

Sources: Rajan S.I., U.S. Mishra and T.K. Vimla (1996) "Choosing a Permanent Contraceptives: Does Son Preference Matter?" *Economic and Political Weekly*, July 20, p.1980. The Third All India Survey of Family Planning Practices in India, ORG, Vadodara, 1990. Calculated by Eapen and Kodoth (2001).

When a male child comes into the family the atmosphere is charged with excitement whereas the birth of a girl brings a stoic silence. With each successive birth of a daughter, the mother's status in the family falls further. It can be redeemed only by giving birth to a son. The mother is even accorded a differential treatment, made to eat a less nutritive diet, work harder. Some are even thrown out of the house or abandoned as a punishment. The father who is genetically responsible for the gender of the child however suffers little or no change in his status if a daughter is born. He only becomes an object of sympathy. Even amongst the rich the house goes into a celebration if a boy is born and mourning if it were a girl as boys are the heirs for property. Not even the midwife is happy as she is paid lesser if a girl is delivered. Thus death wish for a girl child springs from all corners.

Religious scriptures are freely quoted to sanctify the belief that only a son carries forward the lineage. Male members young and old are accorded a special place in most religious ceremonies, during birth, death and marriages. They are considered irreplaceable. The traditional blessing 'may you be the mother of hundred sons' reflects such sanctions.

Superstitions also strangle girl children. For instance Kallurs of Madurai believe that by the killing of a baby girl, a boy will be born next. In Punjab, in some castes girl babies are laid under a tree. The next morning the place is examined to see if a jackal or a dog has dragged it towards the mother's house. If it were there, it is a bad omen, meaning the mother would give birth to another girl. If it is dragged away it means a boy would be born. Among the Khands of Madhya Pradesh it is believed that if a child dies within seven days of its birth it is excluded from the cycle of future female births in the family.

Let us now analyse the context in which such social conditions and cultural beliefs and practices flourish.

ii. Globalisation and population policies favour the death of girl children

The decade of economic reforms with as seen a significant decline in all government expenditure on public health, education. There have been subsidy cuts on food, farming, electricity and irrigation. There is an indiscriminate opening up of the economy to the vagaries of the global imperialist market. The state has abdicated all responsibility for minimum survival, employment and any development. This has created havoc in people's lives. There is a crisis in both the agriculture and industry. This economic offensive against all-working people and poor has particularly affected the female population, which is more vulnerable. The structured gender inequity in the system has placed the women at a survival disadvantage as the impact of reform policies delivers a more severe blow on them. Reforms have both materially and ideologically, encouraged

and aggravated the retrograde tendency of son preference from which sex selection stems. (Refer Table 07)

Table 07

Study this table carefully. See how the female population has steadily declined over the century and how "independence" has not brought in any difference. What with all advancement in technology and communication how can the fall be explained except by rampant exploitation and oppression at the behest of worst governance. In a population of 102 crores even a 1% decline means lakhs of lives unduly lost.

Sex ratio in India 1901-2001

Census year	Sex Ratio (<i>females per 1000 males</i>)
1901	972
1911	964
1921	955
1931	950
1941	945
1951	946
1961	941
1971	930
1981	934
1991	927
2001	933

Statistics source: census of India 2001

To add to it is the fierce population policy pursued by the Government. From early on even Welfare State had portrayed population stabilisation as a precondition for better distribution of the fruits of development and for realisation of basic rights. **The basic inequality in property and distribution of resources and profit is a question that can and will never be addressed by Governments. They are there to protect private property, support huge profits based on exploitation and usurping of resources from people. Thus population problem has been cunningly underlined as the cause for poverty, unemployment and now even gender disparities. Many people have come to believe in this theory.**

The National Family Planning programme, later known as the Family welfare programme was set up. It was seen as a national requirement rather than a question of women's need or rights. However, it was and is still said to be voluntary matter of couples, in paper. Policy statements on Family planning have frequently referred to national and international documents. These documents hold that it is only by ensuring access to food, health, and education that population can be stabilised and not vice versa. But, in practice it has been 'structural adjustments', which have resulted in massive curtailments in public investments on all above, in privatisation and marketisation of medical services. Yet the National Population Policy (NPP), 2000 claims to be gender sensitive. It is said to have "incorporated a comprehensive and holistic approach to health and education needs of women, adolescent and the girl child". In fact family planning programmes, under different names, consume a major share of public investment. A two-child norm is promoted through both coercive and persuasive measures in overt and covert forms. A small family norm promoted by the State is in fact two children per family or punishment for achieving or not achieving it. This has also given rise to a compulsion in increased female foeticide. This also happened in China when Government declared that no couple should have more than one child. This one child policy created social and family problems with a skewed sex ratio, Female infanticide and foeticide more than helping smooth stabilisation of population. Such methods of attempting to solve a socio-economic problem without addressing the root cause of poverty and insecurity without considering the patriarchal bias towards bearing male children has become an important factor for the genocide of girl children in India. (Refer Table 08)

Small family has become both a need and a must in the present cultural and economic milieu for a sizable section, so also the stress on a son. Thus if the couple intend to stop with one child it has to be a son, and should they limit it to two, it could be a son and a daughter, or two sons but cannot just be two daughters generally. Some even insists on the first born being a son only. Thus generally if the second child is also a girl the concerned woman is scoffed upon and should the third turns out to be one she is under threat. **A female foetus or infant has a limited fixed quota. Beyond that it has no place in the womb or world. This is the unwritten statement behind the killings.**

Economic deprivation and poverty combined is one of the major reasons for growing female infanticide in India. Especially rural masses that have neither the access to sophisticated tests or the money to afford such, wait until delivery to confirm the gender. It is retained or rid of depending on whether it is boy or girl. Some of the common methods used to kill the new born is by feeding it the poisonous milk of Calotropis or oleander shrub, or giving it a few grains of paddy which will induce vomiting,

Demographic Profile

Population of India	102.7 Crores
Males	53.1 Crores
Females	49.6 Crores
Deficit of women in 2001	3.5 Crores
Sex ratio (no of women per 1000 men)	933

Source: Census of India, 2001.

convulsions and subsequent death, or feeding it tobacco paste or pesticides, suffocating it to death with wet towel or strangulating it with the umbilical cord, or just leaving it in open space in winter to die in cold, or dumping it in the dustbin. Such inhuman acts done with impunity shows the extent of despise towards females and the devalued status they have assumed. Even the midwife is unhappy because she is paid lesser if a girl is delivered. Even amongst the rich the house goes into a celebration if a boy were born and mourning if it were a girl. When the sources are meagre it is considered a burden and waste to nourish a girl. Girl children who are allowed to survive are often the butt of abuses, utter neglect, undue ridicule and hard labour, which could rob them off their life. Horrible as it may sound flesh trade is the only area where a girl child fetches a higher rate and therefore sought after.

iii. Consumerism, Dowry and devaluation of women

Global market greed vigorously promotes a vicious consumerist trend in vast sections of the people. A decrepit value (less!) system based on gross consumerism has emerged as a consequence. This consumerist culture encourages expensive, wasteful rituals and a pompous lifestyle. Parallelly, in order to accumulate consumer goods and property of sorts a parasitic

“Recently Voluntary Health Association of India has published a research report based on field work in Kurukshetra in Haryana, Fatehgarh sahib in Punjab and Kangara in Himachal Pradesh. These places have depicted the worst child sex ratio as per 2001 census. The study surveyed 1401 households in villages; it interviewed 999 married women, 72 doctors and 64 Panchayat members. The report says that the immediate cause for the practice of female foeticide is that daughters are perceived as economic and social burden to the family. The reasons behind it are anxiety regarding her safety, chastity, marriage etc with problem of dowry looming large.”

tendency that breeds on patriarchal framework has been growing. Dowry demand as such is also to be viewed as an expression of the above. The great disregard and disrespect for the lives and contribution of women to family and society has openly projected itself as the Dowry Menace. **In a consumerist society as values of commodities go up the value for human beings, life as such and value for any values in fact goes down.** Capitalist development has led to calculations on how much would be fetched by whom. Life as such is measured in terms of what financial benefits or burden will accrue of it in due course.

There was a time when bride price was more popular. This was provided by the groom's family to the bride's family for taking away or obtaining a productive member into their fold. Women had value and respect as socially productive people then. But as women in upper class and many times upper caste sections were weaned away from social production sphere and restricted to homework they lost their social worth. This later paved way for the demand for dowry to maintain these women by the groom's family. But what was restrained to upper sections who could also afford such money and goods and which was a show of their wealth turned into a form of harassment. Despite the fact that the majority of women continue to work in fields and factories the problem of dowry seeking and compulsion to provide percolated to all stratas of the society. With degraded status of women she is thereby seen as a burden on whom much has to be spent but return is little. The bride's family has to arrange for money, commodities, and many a times much beyond their means. On top of it they also have to put up with humiliations and continued harassment in a number of cases.

The number of dowry-related harassments and deaths has been steadily increasing in the past three decades from hundreds to thousands in numbers now. Thus the dowry factor has also become the common grounds for the burial of girls when they are just born. This quick rich dowry formula that has spread like an epidemic in society has in fact led to a strong despise for girl babies leading to their early strangulation. Girls are not only considered useless but a burden. While a son could contribute towards upward mobility through dowry, a daughter could cause a downsizing through the same. Such considerations are in operation. Female foeticide is offered as one solution in the quest of 'good life' measured in economic terms. The blatant advertisements for sex selective foeticide, which emerged in the 1980's in urban Maharashtra and Delhi, were the explicit expressions of this consumerist value base.

iv. Property considerations play a role in disposing daughters

It is not uncommon to get rid of women, to kill, loot by hook or crook or to drive away through threats in order to usurp their property. Similarly in

propertied classes and even in classes with medium land holdings methods such as female foeticide/infanticide are underway to destroy any possible future claims to property. Propertied classes do not desire daughters because during or after marriage the son in laws may demand a share in the property. Changes in property law also speak of the rightful share of women in property. This instead of making her position secure in society is also propelling her to death. Patriarchy finds its own solutions for property control. Property whether land or business ownership to sons means retaining it within the particular family. While in the case of a daughter property gets dispersed, Property share to a woman who is herself treated only as another's property (paraya dhan) is highly despised. Even amongst people with medium landholdings parting with land to women would mean further division of land economic crisis, and a fall in social status. And hence female foeticide becomes one way of avoiding it. There have been few surveys linking the land question and declining girl sex ratio. Yet the picture that has emerged through varied observations and studies so far is that the child sex ratio is slightly better in the landless community than in the landed. The general pattern of male control over property and power relation between men and women as a result of it, and with the subjugation and elimination of women as part of it is an indicator in itself. In feudal communities such as in Haryana etc., land is a major issue owing to which girls vanish right at foetal stage.

vi. Violence on women adds to more violence

Like umpteen other evils that ensue from class society and patriarchy foeticide and infanticide in general were also byproducts of the same and compelled on women. They basically reflect a pattern of violence on women and utter disregard for her needs and interests, her physical and mental wellbeing. But this violence is ironically footed on other forms of violence on women such as the dowry violence and apart from it there is also a general physical insecurity or vulnerability to violence that permeates a woman's life. It may be due to the grotesque possibility of being raped right from age one or even largely due to gender based and sexual harassment or due to the increasing attacks on a woman with acid etc., The result is a continued, real and perceived danger for her body and the need to protect it. Girl children are thereby viewed as potential risk and this too is cited as a reason for not wanting them. Women who have faced discrimination, violence are often frustrated owing to their own secondary stakes in family and society. They also tend to feel that a girl child that is marked for a life similar to theirs is not worth having.

vii. Availability of easier means for selective elimination

There have been the varied specific reasons underlying the gruesome practice of female infanticide and foeticide, in different societies at

different times. Feudal moral impositions on women, conditions of virtual slavery, capitalistic exploitative norms, and pregnancies through rapes have all been some of the common causative factors along with the social and cultural conditioning they created. Hence many have been the desperate attempts by women to miscarry or get rid of the just born at the risk of their own lives owing to fear and helplessness-both in west and east. Evidences of this are available in history and literature. But the targeting of girl children in particular have become more pronounced only in later periods.

Female infanticide has been prevalent even as early 18th century. It was identified among Jadagas of Kutch and Kathiawar, among certain communities of North- western provinces-Punjab, Oudh and Rajastan, and Kunbis of Gujarat. There were Caste, pride and prejudices, and racist connotations in these communities. This was compounded by lowered status of women within them. This in turn exerted social and financial pressures on marriage of girls and led to their elimination in the same. It was found that in Punjab among 2000 bedi families living in a certain division there was not a single girl. These crimes were committed in private under pressure. They were done generally by adopting the method of smearing opium before breast-feeding or tightening the umbilical cord over the infant's neck or mouth thus strangulating it. Infanticide was the most common survival threat to infant girls in rural belt. It is said that for a hundred years in the nineteenth century not a single female child was born in the royal house of the Raja of Porbandar.

The sharp escalation in female foeticide has been the contribution of modern technology to boost patriarchy in the late 19th century. What was a crude tactics to avoid girl children in hundreds by killing them on birth in the earlier period became a matter of common practice. As civilisation progressed, girls were sucked out with less guilt and stronger social justifications through improved techniques right at foetal stage. Sex determination tests and ultrasonography became easily and widely available. While the rich could opt for more sophisticated diagnostic methods ultrasonography was at the reach of even common people in towns and villages. They encouraged the pressure to bear a son or not bear a girl already strongly rooted in all sections. They came to be seen as a boon to design the family as desired irrespective of its effects on women's health.

Thus female foeticide serves as the capitalist market strategy through which the desired sex composition is achieved by the urban middle class, elite, be they educated, employed or otherwise. Both female foeticide and infanticide are a product of patriarchy and unequal, unjust socio-economic structure. **While female Infanticide is often prodded by poverty, Female foeticide is promoted by profit motives with patriarchy serving as the common factor in both.** Now let us dwell a little more deeply into the foeticide market.



Diagnostic methods turn into a death trap

All reproductive technology have been basically market-oriented. They are highly capitalistic and patriarchal enterprises ostensibly in the service of women and outrightly exploiting them. Women's rights over her reproductive health are still under debate and lacks proper recognition in our country. Women persay even those educated are not adequately informed of all the experiments that are being conducted over their bodies, the medicines dumped, the tests conducted and the risks that they invariably impose. Being a prey to family, social and cultural pressures they yield subjecting themselves to painful procedures, traumatic experiences. Often they are the unwilling accomplices of the murder of their female foetuses and infants.

In many countries, modern techniques of ultrasound scans and inutero sex testing basically to make pregnancy safer are ironically abused to involve added risks through female foeticide. The sex determination techniques arrived in India

Highlights-prevalence of test and perception of doctors conducted by Action India

- All the 10 private clinics in the area of Nandnagri and New Seemapuri were offering ultrasound out of which 8 offered amniocentesis and 6 of them Chorionic Villius sampling (CVS).
- The amniocentesis costs between Rs 270- 6000, Ultrasound costs Rs 700 and CVS costs Rs1500- 2000
- 6 out of 10 clinics had a huge board notifying the non-availability of such tests.
- 8 out of 10 doctors blamed family planning for this trend.
- According to doctors 90% of the pregnant ladies coming to the clinic, desired a son.
- All the doctors accepted that there is a high demand for these tests.
- All the doctors said that the clients are aware of the cost of the test but not the name, they just say LADKA/ LADKI WALA TEST.
- According to the doctors 50% of the ladies are forced to undergo an abortion.
- Out of 10, only 6 clinics were registered for MTP service.

primarily for the purpose of determining genetic abnormalities. But the strong patriarchal environment combined with the medical industry's search for newer pastures to profit led it in no time to abuse it. Thus the techniques basically began to be abused to determine the sex of the foetus and thereafter destroy if it is a female.

The pre-natal diagnostic techniques involve the use of technologies such as ultrasonography, amniocentesis, chorion villi biopsy, foetoscopy, maternal serum analysis, etc. These are supposedly meant to facilitate the detection of foetal abnormalities and subsequent therapeutic interventions. But all of these are mainly employed for Sex determination. The most popular are amniocenteses and ultrasonogram both in urban and rural areas of India. There are even mobile clinics offering such 'services' now. They are motivated by multinational marketing muscle and heavy financial gains. There is an increasing investment in ultrasound scanners by many medical practitioners.

Amniocentesis at hands reach

Amniocentesis is a scientific technique that was supposed to be used to detect certain genetic conditions. For this purpose the process involves 15-20 ml of amniotic fluid being taken from the womb by pricking the foetal membrane with a special kind of needle. After separating the foetus cell from the amniotic fluid, a chromosomal analysis is conducted on it. This helps in diagnosing several genetic disorders such as Down's Syndrome, neurotic conditions in the foetus, retarded muscular growth, 'Rh' incompatibility, haemophilic and some other physical and mental disabilities. The test is meant more for women over 40 years as their chances of having children with such conditions are more. A sex determination test may also be required in some to identify sex specific conditions such as haemophilic and retarded muscular growth, which primarily affect male babies. Amniocentesis was conducted in Government hospitals earlier on as experimental basis. But in the last twenty five to thirty years they are mainly conducted for Sex determination purposes and thereafter for the termination of the female foetus through induced abortions both in private clinics induced abortions hospitals and Government hospitals. Amniocentesis is hazardous to women's health. In 3-5% of the cases the results could be inaccurate, in 1% it could lead to spontaneous abortions, premature delivery, dislocation of hips, respiratory complications or needle puncture marks on the baby. Amniocentesis, which is commonly used, is normally carried out in the 16th week of pregnancy; amniotic cells are cultured in the laboratory for 3 or more weeks before the sex of the foetus can be determined. Hence, apart from other complications it could pose, there is an inherent risk in carrying out the abortion after this period.

Table 09

Child Sex Ratio

Census	Total	Rural	Urban
1981	962	963	931
1991	945	948	935
2001	927	934	906

A grim picture reflecting the social response and attitude towards the Girl child in last two decades.

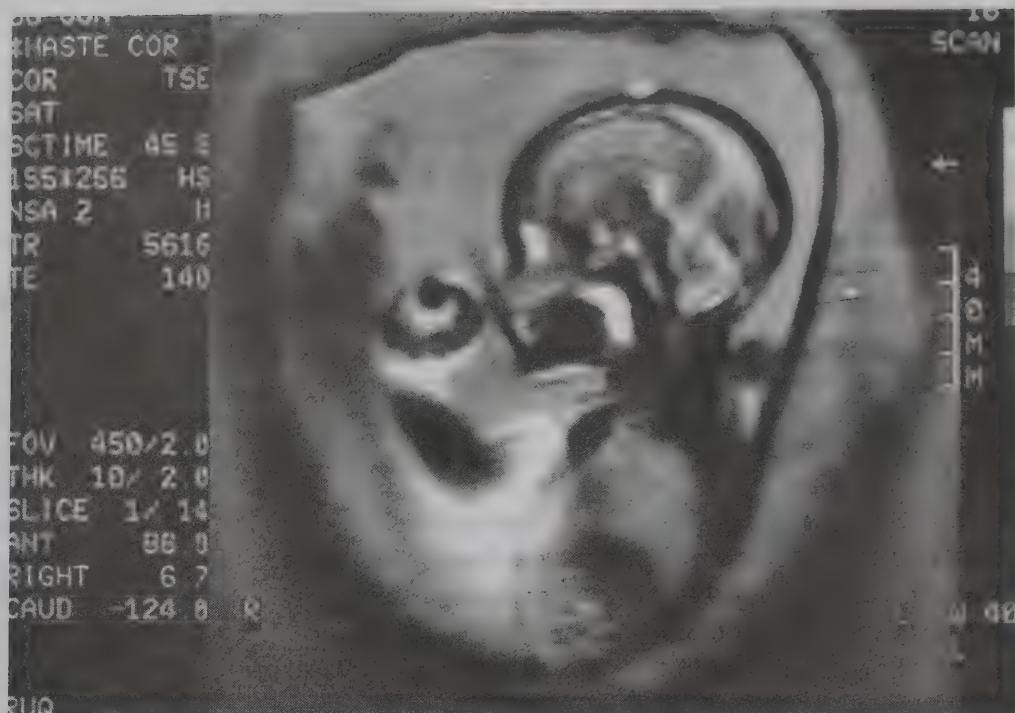
How sound is ultrasound?

Ultrasound testing commonly called as ultrasonography is done with a device that transmits sound waves through body tissues. It then records the echoes as the sounds encounter structures within the body. Their recordings are transformed into images. The images can be viewed on a television screen, recorded on videotape and printed. It enables a doctor to watch the development of the foetus, to assess the gestational age in particular, growth of the baby, determine position of the placenta and diagnose multiple pregnancies. Seems to be a fine invention. So do many expecting mothers/ parents think.

Ultrasonography functions very much like radar that is used to track aircraft. In fact it was originally developed during World War II to detect enemy submarines. Later it became something of an entertainment feature in many a gynecology clinics and a glorious means to mint money. And how safe or effective is this device anyway. While most doctors and almost all patients consider scans to be safe the fact is that it has never been proven to be so. It has actually never been tested for safety. The routine use of ultrasound in pregnant women is in no way justified. In reality even at a conservative estimate atleast 80-85% of women don't need an ultrasound to

“Between 87-88 nearly 13,000 PND tests were estimated to have been conducted in 7 Delhi clinics alone. Reports also say that Delhi has one of the highest rates of female feticide and infanticide among all 7 union territories. Incidentally Delhi has one of the highest numbers of dowry killings too. Recent statistics would definitely show an enormous increase in all statistics in number of clinics, in number of such tests conducted, and number of girls Evacuated, not withstanding so called laws passed. The ever declining child sex ratio between 1961-2001 stands a testimony to this fact.
(Refer Table 02)

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confirm the good health of the baby. An experienced doctor can vouch safe for it through gentle probing by hands alone. And why even a mother can feel it instinctively and through continued interaction. Experimental studies on use of ultrasound in humans have in fact indicated towards more miscarriages, prenatal death, spontaneous abortions, impaired blood clotting, apart from problems in nerve conduction. Animal studies have pointed to health risks such as damage to DNA in cells, intestinal bleeding and long-term brain damage both due to tissue heating etc., Even leukemia and other cancers, delayed speech and left handedness have been found in higher numbers in children of mothers who underwent scanning. And then why undergo it. It can in fact only detect a handful of chromosomal abnormalities out of over 5000 that could be present. Thus the risks far outweigh the benefits.

Ultrasound, happens to be the most widely, misused technique at present, as an easier and relatively less expensive method. Further it can help diagnose the sex of the foetus only after 26-28 weeks of pregnancy .The complications of an induced abortion after this period has to be only imagined.

In fact all methods employed for the sex determination are highly intrusive, risky, quite expensive and socially destructive. Not even 1% of them are utilised for the purpose they are meant which is to diagnose foetal health except ultrasonogram, which are extensively used for all and sundry. The other pre-pregnancy sex selection methods commonly used are X-Y separation of sperms, embryo biopsy and sex selection

through sprays. Pre-conception sex selection methods have currently invaded the market and no law applies to them. None of these are said to be safe. They aid as much in causing gender and social disparity apart from causing a havoc on woman's health. Often there is no scientific validity either.

Some sixty lakh female infants and girls are 'missing' due to all above techniques to eliminate or evade them. Pre conception sex selection techniques avoid the very formation of a female foetus. Thus even anti-abortionists use this method to favour boy babies.

The pre-natal diagnostic techniques have thus come to cause more harms than good. They expose women to serious health risks and complications. There is an increased risk of abortion or congenital malformation in the foetus. **There are serious adverse effects on the reproductive organs due to intrusive diagnostic procedures and late abortions.**

Hemorrhage, chronic infections and inflammation, hormonal problems, menstrual disorders and tumors to say the least are common. There is infact a big racket going on in private clinics where the 'culture' is not properly done or premature conclusions are drawn based on feeble evidence. The foetus is quickly declared to be a female and hence aborted. The heavy fee pocketed ofcourse is welcome enough for all kinds of malpractice feeding on the patient's anxiety and helplessness.

“The controversy around sex determination and sex pre-selection tests started not less than 20 years ago. Several investigative reports were published in major national and regional English journals during this time. One shocking estimate was that between 1983 and 1986 not less than 78,000 female fetuses had been aborted after the sex determination tests. The Times of India in June 1986 also carried an article by Achin Vinayak. He revealed that almost 100% of 15,914 abortions during 1984-1985 by a popular abortion center in Bombay were undettaken after the above test. Between 1986-87 30,000 to 50,000 female fetuses are apprehended to have been aborted. Between 1982-92 the number of clinics for sex determination grew in many fold. In the city of Bombay alone it multiplied from less than 10 to around 300 in no time. A study reveals that in a clinic in Bombay out of 8000 abortions performed 7,999 were that of girls.

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Doctors fuel the detection and destroyal of female foetuses

Globalisation has made import of portable ultrasound machines very easy. And these have been very handy in widening the market for Sex determination tests by utilising the patriarchal mindset and pressures on women.

Between 1975 and 2003, there has been gross violation of the Medical Termination of Pregnancy Act (1972) and Prenatal Diagnostic Techniques Regulation and Prevention of Misuse Act (1974). Some of the tests available for Sex determination and preselection have been even provided on a door to door service basis in some States. There has been aggressive, open and widespread campaign by doctors concerned to promote the concept. For instance "Invest Rs.500 now and save Rs.50, 000 later" meaning it is cheaper to get rid of your daughter now then having to spend heavily on her dowry later. Even "one baba, one baby" etc. How disgusting! These were done with impunity in conjunction with the companies, which are the suppliers of the source material needed for the same. Such open campaigns have been turned down now owing to increasing resistance against such practice by some sections. The alarming Census results of 2001 also compelled the Government to put a check on blatant advertising, at the face of it atleast. But law and no law both have in a way benefited the unscrupulous practitioners to amass wealth overtly and covertly. Customers were charged heavy fees initially as the tests had come up anew, and later on grounds that they were providing the 'service' despite it being against the law. It was all ofcourse special and in the interest of the customers concerned. Doctors deliberately don't give anything in writing or maintain any records whatsoever so

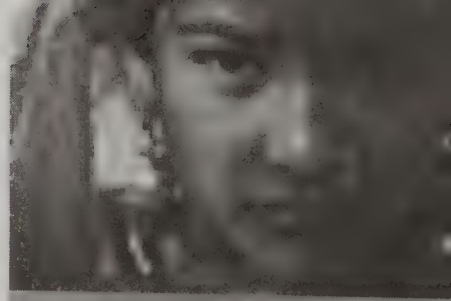
they can't be any medico-legal complications or problems with law and administration.

Often those who perform the tests and those who perform the abortion are different, ofcourse, with a commercial pact between them, so the link cannot be directly established.

When Dr. Anirudda Merlin, one of the most vociferous proponents of Sex preselection tests was once asked, "Is it ethical to selectively discard female embryos?" He said, "where does the question of ethics come in here? Who are we hurting? Unborn girls?"

Commercial interests combined with gender bias and distorted notions regarding solutions to various socio-economic problems faced by people through such population control methods have all contributed to the free flow of female foetuses into the drain by various doctors. Many private practitioners of the trade would even boast that they were "doing social work" by helping miserable women. Such hypocrisy was exposed when the same people failed to provide facilities of amniocentesis to pregnant women during the Bhopal Gas tragedy. This in spite of repeated requests for it by women's groups and the fact that there were many cases of the birth of deformed babies reported, as a result of the Gas carnage. This makes it doubly clear that there is no humanitarian purpose or empathy towards women as is claimed.

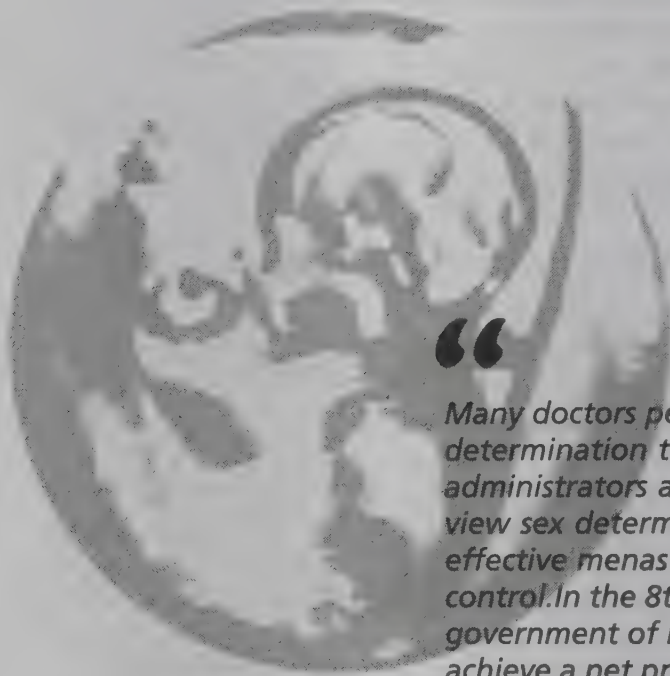
Studies indicate that a number of doctors are also opposed to it saying "It should be banned", "It is inhuman and criminal", "It amounts to discrimination against women" etc., Some are against it but feel compelled to do it as part of their business. Anyway since there is a demand for it one or the other doctor would do it. Why not they is



Due to continued pressure by women's groups, other concerned individuals and organizations the Maharastra government formed a committee to examine the issues of sex determination and sex preselection tests. In 1986 it appointed Dr Sanjeev Kulkarni, a gynaecologist to investigate into the prevalence of the test. 42 gynaecologists were interviewed by him. His findings disclosed that about 42 of them were performing amniocentesis tests for determining the sex of the child. On an average they were performing 270 tests per month. Some had been performing it for years. But majority had started it since 5 years. These doctors said that they were doing humanitarian service to women by conducting the tests.

also the feeling. A sizable chunk approve of the practice and amongst them the number of male doctors are higher than that of females indicating a gender based response to the problem as well.

But the overall picture of drastically declining female sex ratio also shows that Commercial considerations and sexist prejudices have overruled any social or ethical values in medical profession on a growing scale.

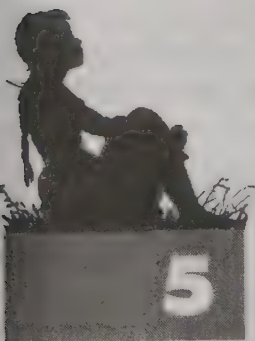


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Many doctors performing sex determination tests and even the administrators and policy makers view sex determination tests as an effective means of population control. In the 8th Five year plan the government of India aimed to achieve a net production rate of one. It means the replacement of the mother by only one daughter. Both sex determination and sex pre-selection tests are seen as handy to achieve the target. The logic here is that lesser number of women would mean lesser reproduction.

In Haryana out of 160 mothers and grand-mothers interviewed by AIIMS study team, 40% supported SD on the ground that it contributed to population control. They said that it prevented families from having a series of females in a continued attempt for having a male.

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Certain major arguments around gender based Genocide

There are numerous arguments offered by promoters, supporters and even clients in favour of female foetuses. Some major arguments that need to be seriously and consistently thrashed out are the questions of women's choice, population control etc., along with the anti-abortionist position with regard to the issue.

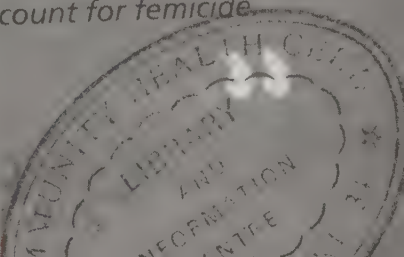
- Some social scientists say, 'It is not better that a woman dies rather than be ill-treated?', 'Is it better to be born and then be left to suffer or die than be killed as a foetus?', 'Does the birth of lakhs or even millions of unwanted girls improve the status of women?'

Like the 'rape insurance programme' which assumed rape as a common, natural occurrence against which a woman had to insure herself, here the degraded status of women is the constant.

Ill-treatment of women? Yes. What is the

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The gap between the number of girls and boys in the country is ever widening which can give rise to serious socio-political problems. Already serious problems oo abduction of girls, rape, polyandry etc are indicated as a growing feature in certain communities and districts where the female sex ratio has lowered .As it is 100 million women have been missing due to femicide over a period of 1901 to 2001. femicide literally means mass murder of female species. In the first three quarters of 19th century femicide has been mainly due to female infanticide, ill-treatment and discrimination leading to higher mortality rate among women/ girls. In the last quarter of 19th century the callous misuse of sex determination and sex pre-selection tests also account for femicide.

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solution? Get rid of women instead of getting rid of the ill-treatment. How very simple! By the same principle, dalits should be eliminated and caste oppression has to be eradicated. And all blacks to end racism. What if all poor people could be done away with instead of letting them rot in poverty and deprivation. There are those who propose even such. So much for their 'just' approach. By the same logic if one should instead propose that all oppressors and probable oppressors be killed to root out the above problems that could in fact lead you to jail or even a hangman's noose, if not a mental asylum.

There are economists who support sex determination and sex preselection by citing the law of supply and demand. If the supply of women is reduced they argue, their demand would increase and consequently their status would improve. Scarcity would create a value for them. They would no longer be as easily disposable and replaceable a commodity as of now. Prof. Dickens, a Western Scholar, opines that "Son preference may also mitigate the sex ratio imbalance..... sons to have their own sons need wives. The dearth of prospective wives will, perhaps in a short time enhance the social value of daughters, reversing their vulnerability and male dominance. Here again the argument does not take into account the whole socio-economic and cultural parameters, which are well knit in a system that considers women as sex and reproduction objects. Under such a system women do not have any social worth as productive beings contributing to the overall wellbeing of the society on par with all others. Hence scarcity of women may make the women, treated as yet another commodity by the economists, more and not less vulnerable as fancied. And instead of accruing value even lead them to more abuse.

As things stand with the fall in female ratio more incidences of Rape, abduction and polyandry are highly predicted. And not without any basis. In Madhya Pradesh, Punjab, Haryana and Rajasthan, among some communities the sex ratio is extremely adverse for women. Therefore, a wife is shared by a group of brothers or sometimes even by patrilateral parallel cousins. Shortage of women in all these States including Bihar has already caused an escalation in forced abduction and of kidnap of girls, gang rape and child prostitution apart from forced polyandry. Recently there are many disturbing reports of reintroduction of polyandry (one woman being married to many men- commonly referred to as Panchali system, where Draupadi was married to five Pandava men) from Gujarat. Times of India reported about the brewing social crisis in most villages of Mehwana district as the number of girls has drastically declined leaving hundreds of boys with no choice but to buy brides from outside. None of the above indicate towards brighter prospects for women owing to a drop in their numbers. These economists probably would do better to wake up to this reality than mechanically apply the demand and supply theory, irrespective of context.

Another popular argument revolves around population control and family planning.

Much has already been said about the population policy of the Government. The entire burden of population control has in fact shifted to women. More so, after the main compulsory sterilisation programmes for men of the emergency period, boomeranged. None of the harmful effects of various contraceptive methods on women is even being viewed seriously. Experiments are being callously conducted at the expense of women who have little or nil knowledge about the same. Thus all this control is at the cost of women, extended to a whole generation of girl foetuses now, present and future. The recent, sexist bias and the pressure on third world countries to limit their population, which in itself is seen as a threat by imperialist masters, is all reflected in the population policy agenda here. The propaganda on population problem and so called reasons and solutions for it by government and various support agencies have deeply penetrated the common peoples mindset. They have helped strengthen even the preposterous argument in support of female foeticide and sex selection based on it.

Another parallel argument is 'If family planning is desirable why not sex planning? It means what is wrong in choosing the sex of the child just as one would plan the timing of the children, the space between the first and next etc., The issue is not so very straight or simple. **Sex planning here is an extension and expression of the oppression on women. The Gender bias in such family design is a manifestation of male dominance.** The very survival of females as a species

“A survey by a research team in Bombay revealed the hypocrisy of the 'non-violent', and 'anti-abortion' claims of the Jain management of the city's Harkisandas hospital. The hospital conducted antenatal sex determination tests till the official ban on the test was clamped in 1988 by the government of Maharashtra. The hospital's handbill declared the test to be 'humane and beneficial'. Doctors team of the hospital justified the practice of Amniocentesis as the parents right to 'quality' where the family has to be limited to two children. Quality here infact refers to male children. The hospital outpatient facilities were overcrowded between 1978-1994. Couples who desired sex determination tests had to book for it a month in advance. But abortion alone the management did not support. The hospital would recommend the respective women to various hospitals and clinics for abortion. What concern! And ofcourse the women were asked to bring back the female foetuses for further 'research'. Foetuses after all are useful raw material for cosmetic and medical industry.”

turns into a question mark over the long term with such an ill will towards a particular sex. Added to this argument is the notion of a 'balanced family'. There are many who feel that a woman having one or two daughters at least should have amniocentesis so they can plan a 'balanced family' by having sons. Instead of endlessly producing girl children in the prolonged quest for a son, in the interest of the family's and Country's welfare it is better they abort the female foetus and have a balanced family with desired son and daughters. But this very concept of 'balanced family' also has a gender bias. Do couples with one or more sons request for amniocentesis to get rid of a male foetus so the next baby is ensured to be a daughter and thereby achieve a 'balanced family'? Never does one hear of such a thing. Not that one wants to either. There are talks about assuring the 'quality' of a child and how sex determination is helpful in doing so. Like designer wears it will be designer babies next where companies may provide for conceiving babies with specific hair, skin colour, and other features for a cost. And given the craze for 'fairness' the idea would catch up too. None would feel the recent, colonial bias behind it again.

- Convolutedly the most vigorous argument revolves around the reproduction rights of women, her choice to have the baby she needs, wants etc., This argument has a lot of currency in many circles. It is repeatedly stated that it is women who volunteers for such tests, who enthusiastically welcomes it. It is their own choice. And to oppose it means an infringement on her freedom and rights. Of course women's rights activists world over have always demanded the right of women over their fertility, to choose whether or not to have children when to have or not have... etc., They have also demanded free legal and safe abortions. But here is a situation that seems to bring in a clause to that freedom and rights by the same activists again. While upholding the above right, one is at the same time speaking of the responsibility of not discriminating. **Right to abort is different from right to discriminate and eliminate on grounds of gender.**

First of all, here we need to analyse this whole question of 'women's choice'. Do women atleast the majority of them really have a choice? Women don't exist in a social vacuum. They are conditioned and compelled by the circumstances they live in. How many abortions can a woman undergo to build a 'balanced family' or fulfil the son preference? There are any number of cases where the women have terminated 8-10 pregnancies in the endless search for a baby boy. This at the threat to their lives. There are women who have died in the process. There are those who have been reduced to living corpses. What a price to pay for their 'own choice'. More on this in next chapter.

- Another loud and dangerous argument comes from the anti-abortionist lobby. Attacking female foeticide they launch an all out

offensive against the right to abort as such. The anti abortionist, fundamentalist right wing in USA is a major source of this argument. It is picked up by communal and fundamental forces in India and elsewhere. They question and criticise the very right to abort by women.

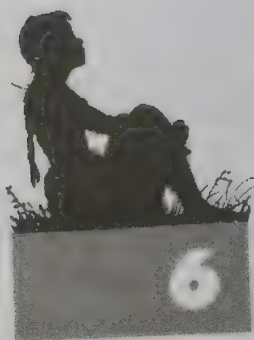
The right to abort has been gained by women after a bitter long drawn struggle. There are innumerable tragic tales of women who had to cripple or end their lives in order to cover up pregnancy, in the process of getting an abortion done through crude, barbaric methods. In 'advanced', 'civilised', 'democratic' America women who go in for abortions and clinics where abortions are undertaken have been facing the wrath of the fundamentalists. There are many debates and statutes on 'Procreative Autonomy' of women.

There are many reasons why a woman would want to abort. Pregnancy is not always wanted. It could just be the aftermath of a violence, a consequence of an unmindful act, It could be a complication medically. It may not be socially or economically viable to hold with a woman being unmarried, divorce, deserted or into such other problems. Whatever may be the reason it is for the woman to ultimately decide whether she wants to continue with the pregnancy or not. And where an equal and democratic relation exists the partner might also have a say. But basically it is the right of woman to exercise her choice, her right to have unconditional access to abortion.

The right to abort in no way conflicts with the opposition to female foeticide. It is a Gender- just pro women position as opposed to the anti-women position of the anti abortionists. While the former is against any violence on women/ girls through selective abortion, the latter is violence on women through compulsion to deliver.

Women's Organisations have been rightly stressing on this aspect. Some even feel that the very use of the word foeticide may give rise to wrong connotations, even strengthen an anti abortionist position. They suggest that the term sex selective abortions be used instead. While retaining the term foeticide as it aptly conveys the extent of destruction of female foetuses one agrees with their apprehension. Necessary care has to be taken to clearly state our position on abortions persay.

As Neha Madhiwalla says in a article in Issues in medical ethics "It is not the abortion which makes the act unethical, but the idea of sex selection". In fact the stress against sex preselection and elimination does not essentially arise as an ethical question. It is more an alert based on a harsh socio-political reality that operates against women.



Do Women really have a choice?

How much do women want Sex determination test followed by foeticide if it be a girl. What are the factors that propel them. Here are some that one quickly comes across while talking to a cross section of women.

1. Lack of self worth: Women do not want to give birth to girls who would have to suffer the same fate as theirs. They find little meaning in their own lives that are full of control and compromises. Consequently they have developed a negative attitude towards self, extending to the gender, and prospective daughters who have limited future prospects. 'Let not my child suffer as I do' is a common refrain even from middle and upper middle class sections of women.

2. Fear: Fear of harassment, neglect, desertion by husband, in-laws is a strong factor in opting for such procedures. Fear of society that looks down upon a woman without a son also adds to it. There are few who dare to get out and survive such pressures. Many feel helpless.

3. Socio-economic compulsions: A girl is seen as a source of expenditure, not income. A burden, not a support, A bundle of woes rather than joy. Expenses on dresses, jewellery, puberty and marriage functions, dowry etc., compounds leading to their dismissal before birth.

4. Need for social recognition: Woman attains a better position in family and society with the birth of a son. She gains her social worth through it or so it is felt. It is a fact in many families where the only pride the woman has is as a mother of son(s). Thus it becomes an obsession. Patriarchal values internalised by women also drives them to cherish the birth of a boy and reject that of a girl. They take pride in bringing 'male' into the world. The psychological satisfaction of being able to exert social

control, have a hold on sons (men again) also acts as an unconscious factor.

5. Sense of insecurity: Violence on women has had a bearing on the phenomenon of female foeticide. Women feel doubly insecure with the presence of a girl child in the family. Incest, Sexual violence, kidnap, rape, worry over guarding their chastity, possibility of marital violence all combine into anxiety that is better avoided.

6. Son as future investment: Son is seen as the security factor in old age, economic and social support even if this is often a loaded myth. Religion and rituals have nailed on the notion of the son as the must for performing last rites and for continued lineage. Property care and transfer also call for a son. Hence the race after the male offspring.

Unless everyone of these issues, linked with an oppressive, patriarchal structure is adequately addressed, a woman whether she wants it or not, will have to jeopardise her physical and mental health in the quest for sons. Many women remain traumatised having to kill their babies before or on birth.

Here a word or two needs to be mentioned about what is commonly termed as New reproductive technology (NRT). **All current reproductive technology is inherently anti women. The research, the practice, the aims and the direction none work with due regard to the women's need for health.** NRTs have made women's bodies the sites for scientific experimentation. They manipulate the reproduction ability of women and even infertility in some women for market purposes. It is yet another mammoth money spinning industry. The heavy funding and research in bio-technology and genetic engineering concentrate on a virtual warfare on human reproductive mechanism to suit their



Tamilnadu is highlighted on the chart on female infanticide. It is essentially a post 1960 phenomenon in Tamilnadu. Evidence from the field and the primary health center records on causes of infant death suggest that every year around 3000 female infanticide cases occur in Tamilnadu. More than two thirds of these deaths take place in the districts of Salem [average 1100, 1995-99] and Dharmapuri [average 1200, 1995-99]. Madurai, Theni, Dindigul, Erode, and Namakkal on the south of the above and Vellore on the north form a contiguous region and account for all the remaining FI deaths. Female infanticide is most often a product of poverty combined with notions of patriarchy. And women in general suffer the burden and guilt. Few have been able to revolt.

Highlights of opinion poll of 3000 women across the Delhi conducted by KARVAN

1. 66% women wanted a son as their first child due to higher social status of a boy.
2. 92% women think that their son will carry on the name of the family and 52% were not sure whether their son will contribute in the income or look after them in their old age.
3. Though 66% accepted that a daughter is a big emotional support for her parents but 88% said that she is Paraya Dhan and also a liability as heavy dowries need to be given to them.
4. 41% revealed that the decision to go for sex determination is taken by their husbands, 67% women said that the social pressure and the pressure from the in-laws or husband or parents to bear a son compel them to go for the test.
5. 66% fear that if they are unable to bear a boy their husband will go for the second marriage. 69% said that they will lose status in the in-laws house, 66% said there is always a fear that their husband will desert them.
6. 51% women go to the local nursing home for abortion after the test, 16% approach local midwives, 13% to local clinics and only 16% to medical practitioners.

purposes. Women are the natural, targeted population. More so poor women. They are turned into not just baby producing machines, but those who would produce eggs, embryos, and fetuses, all for a price. There are advertisements seeking wombs on rent. It is termed as assisted reproduction. Poor women respond to it for survival needs. In big cities girls sell eggs for Rs.20, 000 or so. In Mumbai, it is said that infertility clinics get not less than 6-7 calls per day from girls offering to sell eggs. Sperms are available for a price too. Embryos and foetuses are used in cosmetics industry and tried for specific diseases such as Parkinson's disease by the rich.

Commodity world has offered to turn babies also into 'perfect' commodities, all measured and fixed. Genetic screening and cloning technology seeks to reinforce racist, casteist and patriarchal prejudices. There are no safe contraception methods to avoid pregnancy nor are there safe means to cure infertility. Hormone treatments create harm on women's health. But who is bothered!

Women have no say or control in this experimentation on their bodies with every new reproductive technology. There is no care, no check on use of it on poor women without their knowledge or consent. The pharmaceutical industries and the medical Mafia, hands in glove with the government is continuously gearing itself to make more profits through new ventures and expansions.

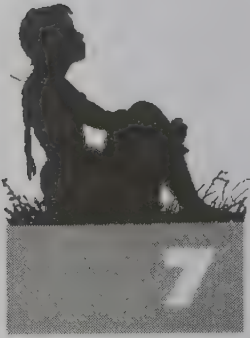
Women have little choice or say in any of the above. There are neither humane nor safe solutions offered to their problems around reproduction. There is no heed for the suffering; the pain, the diseases that women acquire as raw material in reproduction technology industry. The problem has serious medical and social dimensions that call for more elaborate study and concerted struggle. A 'choice' based on above factors is no choice. And **to endorse violence on females even before birth as 'women's right' is abominable.**



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During 1980's sex determination tests were highly expensive in other countries. They were under strict government control too. But in India the test could be done for any amount between rs 70 and rs 500. Thus not only upper class but even the working class women were targeted customers. In many government and private employment sectors medical bills for amounts spent on SD tests by women employees mounted.

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Laws let 'loose': Does not hold the culprits

As we have already seen the obnoxious practice of female infanticide was prevalent in some communities even in 18th and 19th Centuries. Humanitarian considerations provoked some British administrators and Indian reformers to recognize and attempt to abolish this custom. The earliest attempts to eradicate were made in Kathiawar and Kutch by Alexander Walker, chief resident of Baroda as early as 1808. Penalties were imposed. An 'infanticide fund' was created to defray marriage expenses. A scheme of awarding parents of girls with cash was initiated. But there was no official policy against female infanticide as such. The special Act of 1870 drafted by John Strachey for prevention of female infanticide was enforced on 17th April 1871. It provided for increased surveillance, restrictions on marriage expenses, monitoring of pregnant women by village authorities, meticulous registration of births and inquests if the child died within a week etc. Periodic census was mandatory. Local government was vested with legal powers to enforce the measures and disobedience of any provision was punishable by six months imprisonment and a fine of Rs 1000 or both. It made midwives, chowkidars, patwaris, dais and a range of village officials and functionaries responsible. They were directed to discourage abetting of crime. Thus this law made the whole community liable. As such incidences of killing generally had social sanction, it was an effective instrument in curbing the practice. But by 1906 the Act was withdrawn as the crime was deemed to have been eliminated thus making it unnecessary by the local governments in some provinces. This ended the British initiative against female infanticide. It has taken decades before the matter has come into the limelight again necessitating special laws.

There was a prolonged and systematic campaign against sex determination and sex pre-selection, which were growing at an alarming rate by women's groups and forums formed for this purpose especially in Bombay. Only after this was the Maharashtra government pressurised into passing a law, the first of its kind on this issue, in India. It enacted a law called Maharashtra Regulation of Prenatal Diagnostic Technique Act, 1988, which was passed on 10th May 1988. It banned the use of medical techniques for the determination of the sex of the foetus. It banned advertisements relating to the facilities of sex-determination. But it allowed the regulated use of techniques approved and licensed genetic counseling centres, clinics and laboratories. This Act was repealed by the Prenatal Diagnostic Techniques (Regulation and Prevention of Misuse) Act, 1994 which was passed on 20th September 1994 applicable to whole of India except the state of Jammu & Kashmir.

Other laws that existed prior to this and pertaining to the issue were the relevant section from Sec 312 to Sec 316 of the Indian Penal Code (IPC). These hold the practice of sex determination by Amniocentesis followed by abortion in case of female child as not only illegal but a criminal offence, punishable with imprisonment and fine. Under the Medical Termination of Pregnancy (MTP) Act, 1971, all abortions carried out require the consent of women and any abortion after 20 weeks is illegal. There are other conditions to be considered such as risk to the life of pregnant women, injury to her physical or mental wellbeing, substantial risk to the physical or mental wellbeing of the child etc before allowing an abortion by registered Gynaecologists and obstetricians. Thus Amniocentesis is also an offence under the MTP Act as it is generally



Dr Ronald Ericsson, has a chain of clinics conducting sex preselection tests in 46 countries in Europe, America, Asia and Latin America. In his handbill he once announced that out of 263 couples who had approached him for begetting children over a period of time, 248 selected boys and 15 selected girls. This shows that the preference for males is not limit to third world countries but is virtually Universal. Nothing surprising as patriarchy is a Universal phenomenon as well. Only that India is one of the leading countries in female foeticide and femicide as such. In Ericsson's preselection method, no abortion or apparent violence is involved. Hence it may even appeal to some who oppose sex determination only on such grounds. But SD or SP tests both pave way for drastic reduction in female species. They contain the potential danger of triggering a violent social disaster in the long term.

carried out in the 16th week of pregnancy. After which as we have already noted the entire process, culture and tests etc normally takes another 6 to 8 weeks based on which the decision to abort if it is a female is made. It thereby violates the MTP Act, which stipulates that abortions have to be carried out within 20 weeks.

But these Acts did not suffice to regulate the use of Pre-natal Diagnostic Techniques for purposes other than detecting genetic, congenital, metabolic disorders. They did not prevent its misuse for the purpose of Prenatal sex determination leading to female foeticide and matters connected therewith. Thus a separate Act called The Pre-natal Diagnostic Techniques (PNDT) Act, 1994 was passed. It provides for compulsory registration of all genetic counseling centres, genetic laboratories and clinics. It laid down specific conditions such as the age, health of the pregnant women etc on whom the PNDT could be conducted. It prohibited the communication of the sex of the foetus to the pregnant woman or her relative. It prohibits the seeking, encouraging and the conduction of any test including ultrasonography for the purpose of determining the sex of the foetus.


Ironical as it may seem, the very organisations which were instrumental in getting the PNDT Act passed were next forced to struggle against the same with discontent and demands for changes in it. A closer look at the Act will make the reasons behind this self-evident.

This new law, the pre-natal diagnostic techniques Act, 1994, just as dowry law with its many amendments, only barks and does not bite. It was only symbolic and served as an eyewash. First of all, it did not address the problem of sex determination in a comprehensive way but only superficially. It did not even possess the basic mechanisms necessary for its own effective implementation. It infact left adequate grounds to ensure that its purpose or claim is defeated. The list of conditions under which PNDT can be conducted, and abnormalities to detect which it can be performed, both could be expanded by the central supervisory board and thus is left open. The legislation did not question the techniques in any manner. It did not address the risks involved. It deliberately closed its eyes to the mushrooming commercial interests taking advantage of it. It fails to address the social pressure and prejudice working against women. It infact granted renewed legitimacy to a great private sector expansion in the trade contrary to the demands put forth by many concerned social organizations and activist groups. The demand has been that the tests be made permissible and confined to government hospitals alone so there is better monitoring. There was no provision for registering any of the sophisticated equipments used, on the grounds that they are also meant for other purposes. There was nothing to challenge the technique of sex pre-selection or pre-conception which are being practiced in various parts of this country. There was no provision for any local vigilance

committee or for third party complaints both of which can contribute for better implementation of the Act. **And more than all while leaving many gaping holes through which the promoters, profiteers and practitioners of selective female foetal elimination with PNDT can escape, the law comes down heavily on the women who are for most part the victim and not the perpetrator of the crime.** She has little or no choice in decision making. Often she is compelled to destroy the foetus or kill the infant and the methods adopted make it difficult to prove. Law refused to recognise this fact of social coercion especially when it comes to female infanticide where while the father and the rest of the family are excluded the woman is penalised. This even prevents the woman or those concerned about her from reporting the crime.

With the Judiciary being patriarchal in its attitude this will only help it to use the law against the women. Whether in Karupayee v State, Satya v Sriram or v Krishnan v G.Rajan cases which have been highlighted separately here, the typical anti-woman stand is expressed clearly by the court. They pay no heed either to the general vulnerable low social status of women, their powerless vulnerable position in the family or any sensitivity towards the specific circumstances in which the concerned woman lies trapped in particular cases.

In 2001 a public interest litigation (PIL) was filled in the court for the non-implementation of PNDT Act under Article 32 of the Constitution of India. Center for Enquiry into Health and Allied Themes (CEHAT, Pune, Mumbai), Mahila Sarvangeen Utkarsh Mandal (MASUM, Pune) and Dr.Sabu George, who had extensive experience and technical



In Satya vs Sriram, the court held that aborting a foetus without the consent of the husband amounts to cruelty and therefore the grounds for divorce under Hindu Marriage Act. It even observed that there was a need to protect the right of the father to enjoy the spiritual benefit of having a son. In V.Krishnan vs G.Rajan, the Madras high court held that the MTP Act does not confer or recognize the absolute right to terminate the pregnancy in any person including the pregnant woman even in the first trimester. There is no question of abortion on demand. Thus it took a conservative stance towards the women's right over her own body.

knowledge in the field, jointly filed this petition and Lawyers Collective, Delhi fought on their behalf.

On hearing the case the court found that neither the State nor the Central Governments had taken necessary action for the implementation of the PNDT Act even five years after its enactment. Suitable directives were thereby issued by the Supreme Court to both the Central and the State Governments for proper implementation of the Act. The directive provided for the registration of all centres, clinics machines including ultrasound, registration of Doctors owning and using the above. Under this some action was taken immediately. Some 16000 ultrasound machines were registered, around 100 unregistered were seized and a few hundred cases filed for violation of the Act in 2000-2001. But it hardly made a dent into the problem, which was much larger and widespread.

The 2001 Census figures brought to focus the noted economist Amartya Sen in Frontline 2001 which indicated a sharp decline in the child sex ratio in the past one decade awoke many concerned people to the shocking reality of this 'missing girls' murder mystery. It accelerated the campaign against female foeticide. Many groups pressurised for amendments in the PNDT Act 1994. This gave birth to the amended act with the title 'The Pre Conception and Prenatal diagnostic technique (Prohibition of Sex selection) Act' (PCPNDT). This came into effect in February 2003.

The salient features of this act as compared to the earlier 1994 PNDT Act were that both pre and post conception sex selection tests were brought under the act. Ultrasounds including mobile ultrasound were to be registered, conditions for Scans in pregnancy were defined and records of scans required to be maintained. (The law ofcourse did not in any way restrict the use of ultrasound for any essential medical purposes, which was drawn up by the Indian council for Medical Research). Women undergoing the test were presumed innocent. Complaint mechanisms were better streamlined and authorities to address the issue constituted. Penalties for violations of the Act were also enhanced. Imprisonment for 3 years and fine of Rs.50,000 at first conviction for those who seek help in sex selection.

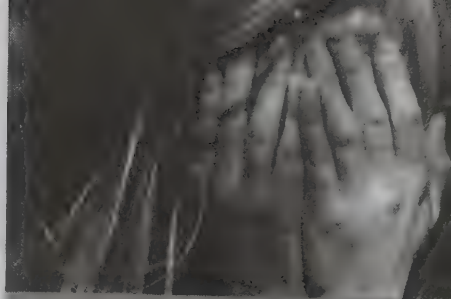
This partly tightened certain screws in the earlier act and put in place some checks. Registration certificate and the message that under no circumstances the sex of the foetus will be disclosed are to be displayed. It is mandatory.

Yet some shortcomings are glaring. The terms genetic/ultrasound clinics/imaging centers all have different connotations but have been constantly used interchangeably diluting their roles in the process. The Act also does not categorically define the persons, labs, hospitals or institutions permitted to be involved in sex selective techniques. It is easy to qualify

for the practice. Wide scope was offered for the same. The fact that ultrasound machines are used in most general hospitals, nursing homes, many clinics and can claim validity for a multitude of purposes, concealing the fact of genetic diagnostics has not been seriously considered. By not restricting the practice of diagnostic techniques for sex determination to fewer government controlled hospitals and institutions, they have been allowed to be exploited by a whole range of private commercial enterprises, doctors and sundry.

Medical council is vested with the right to impend or cancel the registration of the concerned doctors. But given the general consensus for the practice and the trend of suppressing evidence and turning a blind eye to glaring mistakes, misdeeds and profit ventures at the cost of patients by various doctors, one wonders what serious measures can be expected.

On the whole it is not only that there are inherent weaknesses in the law but that the implementation remains poor. There is neither the political will nor the social commitment to implement. The existing socio-economic structure with its deep-rooted inequality and injustice and exploitation to prosper and profit at the core, is in no way interested in securing its implementation or betterment. **Thus there is the continued apathy of the government to implement even its own laws properly, providing the necessary infrastructure. There is the persistent patriarchal mindset and attitude of the functionaries of such laws. Both collaborate with the violent patriarchal family and social structure. Such a structure demands many things from women including a reproduction of offsprings of its choice, at its will.**



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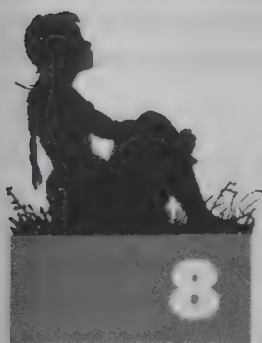
In Karupayee vs state, where although the father was guilty, the court acquitted the father and punished the mother stating that the two day old infant was under her care only and no one else had access to her. Law to punish women not protect her.

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Conspicuous hoardings and advertisements inviting sex determination have of course come down. But the malpractice is continuing underground and spreading rapidly. Hence on the one hand there was not a single conviction for female foeticide anywhere in the country for years after the law was passed. Complaints of course have been registered with the police. On the other, contrary to the law, any number of shady clinics have mushroomed, multiplied, with the sole business of Pre-natal sex determination, sex selection etc. They are not registered as required. Despite countless demonstrations, practice of female foeticide keep on proliferating. New technologies arrive on the scene year after year.

Recent developments of less intrusive ultrasound facilities have spread like weeds all over the country. Yet according to the estimates only 1% of the machines in use are licensed. Various new techniques like X-Y separation and pre-implantation genetic diagnosis are also abused for the purpose of sex determination. The end result is that female fetuses continue to be exterminated and female infants hounded to death at an alarming rate.

Various state-sponsored schemes, which have been initiated to tackle the issue, have not been very successful either. Many like 'Balika Smridhi Yojana' by I.K.Gujral Govt in 97, the 'Apna bheti apna dhan' scheme by the Haryana Govt etc promised monetary incentives which were not fulfilled, or not continued or were not of immediate value etc. In any case grants for allowing the female to be born, to live as such is a crude way of addressing the issue, indirectly endorsing the anti-female stereotype and does not seek any basic change or motivate towards it. The pseudo 'Cradle Baby Scheme' much propagandised by the Tamilnadu Jayalalitha Govt seeks to offer shelter and give the girl child in adoption instead of killing her. This once again sanctions the notion of not wanting the female child. The underlying problem thereby remains untouched. The fact remains that this scheme also has failed due to its bad implementation and neglect of the abandoned child as against the tall claims made. Official figures reveal that out of 133 children 70 died due to neglect under this scheme while unofficially it is reported to be much higher. Recently considering the sharp declining sex ratio in Punjab in 2001 census the Akal takt jathedar has issued a fathwa which is a notification to the Sikh community that, " the act of female foeticide is violative of Sikh principles and the offenders would be excommunicated ". What impact this has on the community and whether it favours women remains to be seen, given the political position of religious organisations as such towards women. Thus the overall picture still remains bleak and calls for a great deal of attention.



Actions against the act of selective abortions

The entire issue was first brought to light by women's organisations, activists, researchers, sensitive lawyers, scientists, doctors and so on. Women's centre - Mumbai, Saheli - Delhi, Samata - Mysore, Sahar - Baroda and Forum against sex determination and sex preselection (FASDFP) an umbrella organisation of various women's groups, democratic rights groups, people's science movement, doctors etc took up the question seriously. Protest actions by different women's groups in the late 70's turned into a consistent campaign at the initiative of FASDSP in the 1980's. Some research organisation in Mumbai and Delhi took a stand against the sex determination tests too. Concerned groups and individuals in various cities including Bangalore began to demand that the tests be used for the limited purpose of identifying genetic disorders. The facility should be available only in select government hospitals under strict supervision they said.

From then on there has been vast media

Just a few years back a US based company, gen-select ran a series of advertisements in the 'Times of India' for a gender selection approach which said that it is "safe", "easy to use" and "upto 96% effective", "gender selection is now a reality" etc along with a photograph of a bonny baby boy. It provided sketchy details about its product, all dressed up in pseudo-scientific jargon. The advertisements provoked immediate protests from women's and child rights group in Bangalore against the product and the paper. The TOI subsequently stopped running the advertisements but it justified its decision to carry the advertisement by arguing that women must be given the "freedom of choice" etc. The promoters like Jill and Scott sweazy conveniently claim ethicality and exemption from PNDT Act on the premise that the procedure is preconception and not prenatal. Leading gynaecologists and obstetricians said preconception sex selection technologies are only 'hit or miss' techniques, with no scientific validity and the genselect spray is risky and could cause infertility. Anyway the company had so designed the kit that it could easily escape should the method prove ineffective or induce problems.

coverage, campaigns, public meetings and panel discussions. There have been poster exhibitions, television programmes. Petitioning, lobbying were all done to exert pressure on the government. There was also a publicised picketing in front of the Harkinandas Hospital in 1986. It was only as a result of all these that the government shook its apathy and a bill to regulate the use, such diagnostic techniques passed. The bill became an Act in 1988. Laws were also made but with sufficient loopholes without taking into account the major aspects proposed by those who had taken up the cudgels against the tests.

Forum found those laws alone did not make any change. The concentration shifted to public education. Some creative well conceived programmes were held. In 1986 there was a rally led by daughters. A childrens fair challenging sex stereotyping and degradation of girls was conducted. Stickers and posters promoting positive images of women were widely distributed. They carried messages such as 'Daughters can also be a source of support to parents in the old age'. 'Eliminate inequality, not women' 'Demolish dowry, not daughters' 'Make your daughter self sufficient, educate her, let her take up a job, she will no longer be a burden' etc. A mobile fair named 'Women struggle to survive' was organised by the Forum which conveyed these messages through songs, skits, slide shows, video films, exhibitions, booklets and so on. Picketing have been there in front of clinics conducting sex determination tests. There have been a couple of protest against advertisements justifying and inviting clientele for female foeticide, against doctors and clinics indulging in it. Slogans such as 'Daughters are not for slaughter' drew attention.

Over the years the issue has certainly gained further momentum thanks to all these efforts no doubt. There is a better awareness in some sections. There is some more voice raised against it. But still where are we? Has the situation improved? After two decades of activity against the killings it remains unabated with the female sex ratio declining conspicuously. Recent work on the illwilled practice points to the abortion of one lakh female fetuses after sex determination tests during pregnancy in the last three years alone. Some call it 'Gender cleansing'. The problem is complex. It is a product of devalued social status of women. Therefore the solution cannot be very simple either. It has to be addressed at many levels.



Multipronged attack a must

Many of the so-called equal and inalienable rights of the people including those of the children as per Universal Declaration of Human Rights rest peacefully in paper. Female foeticide and Infanticide infact fit into a crime defined as Genocide. Of the five acts that would constitute Genocide by definition they satisfy not less than four. They include killing members of a group, causing serious physical destruction and imposing measures to prevent births within the group. Female foeticide alone is already said to match and even surpass some of the worst crimes of genocides in the world in overall scale. Consider the fact of 15 lakh girls who have vanished in the 0-6 age group in last six years alone to grasp the enormity of the problem.

Now the question is what is to be done? It is clear that female foeticide/ Infanticide is no isolated phenomenon of inherent violence against a girl child alone. It is interrelated with a whole complex web of utter degradation, neglect, oppression, exploitation, violence, humiliation and ultimate rejection of the



Punjab presents one of the worst pictures as regards child sex ratio in India. Most people male and female whether employees or housebound are aware of the sex determination tests consider it useful as per a sociological survey conducted there. Naturally, Punjab was the first to start the commercial use of the test as early as in 1979. There were widespread advertisements in the newspapers regarding the New Bhandari Ante-natal sex determination clinics in Amritsar. This was the first to alert the women's groups to denounce the practice. And yet every ninth house in the state has continued with sex selective abortion even in 2002-2003.

female gender prevalent in the society. The every day reality experienced by many women are bitter with no end in sight. There is lack of adequate economic opportunities to a dignified life. The social and cultural environment required to survive on one's own confidence is hollow. There is a glaring absence of a serious political grit to safeguard the fundamental rights of women as human beings and fulfil their demands and needs. All these collide leading to bid a permanent goodbye to the girl child at the earliest possible avenue.

The measures to counter, to change must be multifaceted, must be consistent. The social conditions of women have to be necessarily improved. Girls need to be educated, employed. From young they have to be cultivated such that they are mentally and physically prepared to face various challenges in life. They need to be encouraged to be self-reliant. Just education and employment though they are the basics, essentials don't suffice unless women are made to be self-confident, self-respect and self-worth. This is evident, as the rate of female foeticide is higher in educated and employed sections of women. Paradoxically, the situation is better amongst poor Dalits and Tribal sections. So, the situation amongst minorities. None above have much scope for any kind of upward mobility. Child sex ratio statistics reveal better survival stakes for children in these communities. (Refer Table 10)

Table 10


Child Sex Ratio Total, SC,ST and General Population India 1991 and 2001

Population Total	Year	Total	Rural	Urban
	1991	945	948	935
	2001	927	934	906
Scheduled Castes	1991	946	947	943
	2001	938	941	924
Scheduled Tribes	1991	985	986	971
	2001	973	974	951
General	1991	940	943	933
(Total -SC-ST)	2001	919	925	902

- Education on gender disparities and sensitivity towards gender have to be developed from young age. The community as such has to be organised to monitor such problems, record pregnancies, and deaths, adopt convincing methods to curb the practice of infanticide and destruction of girl children. Without people's willing participation, no crime on women can be easily controlled.

Various forms of violence on women have to be seriously addressed and respective laws implemented. As such conviction rate is so poor even in dowry related cases that the harassment instead of reducing has found ways to multiply with impunity. Though dowry violence is a household word now, the implications of it on women and society have not been analysed at depth still. The very idea of dowry, its practice, violence related to it including gendered foeticide and violence in the name of it, have not deserved the attention they should. This despite much that is spoken, written on it and the innumerable struggles around it. A series of incidents where women have got the prospective in-laws arrested at the time of wedding or dowry demand and harassment is what provides for better hope. Such actions can in turn trigger more, as new role models are created. Following such incidents we find many more women boldly canceling their marriages, which are just commercial contracts at large. Women and men, the student community in particular, should take the necessary step ahead, by taking a firm stand against the very concept of dowry and reject its practice on any ground.

There is the fact of more or less dismissing all of women's labour, taking for granted without a sense of the time and energy that goes into it all, without recognising or refusing to acknowledge the social necessity and value of such labour. Thus there is an undermining or belittling of her contribution to keep the family and society going though it may not all appear so at the outset always. There is a terrible patriarchal blindfold on this social aspect, that is key to much



The rates of female foeticide have increased along with the increase in female literacy rates. For instance a census study of Kolkata observes that 'the child sex ratio has declined sharply from a high of 1041 females per 1000 male children in 1951 to a abysmal low of 923 in 2001. This is the lowest child sex ratio for Kolkata in the last 50 years. A major cause for the decline is sex-selective foeticide'. Sex ratio of Greater Bombay has reduced from 791 in 1991 to 774 in 2001. These inspite of rise in literacy in these places.



violence on women, and their own negative approach towards themselves. Such a status quo is deliberately and casually maintained by the economic powers that control the society in order to exploit women's labour on cheap, easily available source. It is conveniently and 'naturally' covered up by socio cultural norms in general so things operate as suits the majority of men. Arguments of sorts would abound whenever the topic assumes serious proportions. Exceptions of sorts projected. But truth lays bare revealing itself in gory forms. Foeticide and Infanticide of the female species we should grant is one such. Women constitute half or even more of the economic, social and emotional pillars that holds the basic structures (ofcourse men form the rest of it) together. And the continued weakening and destruction of these will mean a disintegration or collapse of the structures as such. It is inevitable. This vital aspect is to be internalised by all concerned with just, meaningful assertions and actions materialising on the basis of it.

- Nobody denies the need to check the population in the overall interest of the society and primarily women. But the myths around population as the ROOT cause for poverty and lack of economic advancement has to be cleared. The crude population control methods employed and the reasons for their lack of reception amongst people has to be underlined. The parasites who really suckle on the fruits of the hard work of the downtrodden masses, who prosper in turn producing only deprivation and artificial scarcity have to be exposed. Unless this is done meticulously it is difficult to remove the strong bias even in well meaning people who tend to unconsciously extend support to a gender based genocide.
- Laws by themselves cannot usher in any change unless they are meant for implementation. Otherwise laws, more laws and amendments after amendments to laws can only pile up the study material for students of law. They may help certain professions to carry on, provide concerned lawyers some scope to argue. They aid the ruling governments to maintain a façade of justice through the judiciary stringent laws have to be sought so there is a space available within and around which some struggles can be pitched. No doubt about it. But yes, loopholes in laws, unwillingness to implement and collusion with the crimes at many levels often make them seem a frustrating exercise. All the same in a long drawn struggle against violence on women amidst many odds and obstacles every weapon matters and favourable laws which could help women is one of them. More important is the need for diverse means to get them implemented at any cost.

But the crux of the matter lies in the governance. It is in how the various processes in life and society are governed by those at in the helm of

power. It is in where there interests lie, in people or in property and profits, using and disposing people according to their villainous designs.

Socio demographic goals of the Government for 2010 envisaged making school education free and compulsory upto 14, reducing infant and maternal mortality rates, universal access to information on contraception with wide choice and services providing adequate basic health services and implementing welfare programmes etc., The National Population Policy listed it all. But the focus has been mainly on two aspects that formed part of the list, which were immunization programmes through vaccines and Aids awareness and control. The above programmes are a great political farce in themselves. They have also grabbed the lion's share in the ever lowering budget allocation for health.

Similarly the United Progressive Alliance (UPA) Government formulated its Common Minimum Programme with a special package for women and children. They included many promises to remove discrimination, encourage women's participation in welfare schemes meant for them, definite fund allocation for their development, non coercive gender sensitive approach for population stabilisation etc., The content was a professed pro-poor, pro-women approach. But we are aware of the escalation in violence on women with newer forms gladly gaining strength as culprits go scot free.

All measures stated earlier can be realised only partially and very gradually, unless the government exhibits a real political will to check, if not stop aggression on women and children. Common people/ women will have the economic and social strength and the confidence not to participate in, even



“ Any advertisement, display or depiction suggestive of supporting sex determination by any institution or agency has to be fought. In Feb 2002 Balaji telefilms, in one of the episodes of its top-rated television serial, showed a young couple checking the sex of their unborn baby. MASUM a Pune based women's organization made a complaint about it to the Maharashtra State Women's Commission. The commission approached the municipal corporation and an FIR was lodged at the police station. This was followed by an uproar. Balaji telefilms had to come forward to salvage the damage by preparing an ad based on the commissions script. The ad was to convey that SD tests for selective abortion of female foetus was a criminal offence. ”

co-operate in defying, the morbid murders of little female foetuses and children only when there is an assurance about their quality of life as grown ups. No amount of advices, awareness campaigns, literature on the issue and laws can alter the pattern of femicide drastically unless realistic solutions, which will bring perceivable changes in their lives can be offered.

But the Government is visibly just not keen on any control over private ownership, the roaring business of female foeticide and the easy availability of test on the one side. It is not penalising the practitioners making them accountable either. On the other its own economic policies narrowing and downsizing all public distribution and health care systems, covertly promoting disruptive population measures as per WTO stipulations, impedes its check on girl children getting wiped out at foetal and infant stage. Rulers inundate the people with poverty, deprive them of basic means for minimum decent livelihood, while middle classes are fed with consumerist goals and dreams. In a patriarchal set up, they in turn adopt various grotesque forms to cope up with survival needs or grab the most through calculated violence, neglect, killing and even sale of children. **Hence unless the larger socio-economic and political dimensions to this problem is understood and addressed neither female foeticide or infanticide can be really brought to any significant control.**

Prima facie evidence therefore points to the state as mainly responsible for the lowered status and increased violence on women including the growing incidence of female foeticide. It could be satisfied with some glossy reports over the issues, seminars and speeches for media attention. But the burden of pinning it down to initiate action, improve again falls on the concerned organisations and individuals. Conscious vigilance and continued struggles against anti-women cultural values, customs and practices in oneself, in the neighbourhood and society must multiply. Difficult yes, but it is a must as the real hope lies only in conscientious citizens and organised women/peoples initiatives to fight this evil and much more at ground level. It is the only way that all children, equally soft and sweet, curious and innocent with natural longing for life, and a right to blossom in this soil, irrespective of gender can be made possible.

Reference:

- ◆ Law Against Practice of Female Foeticide and Infanticide - Shalu Nigam
- ◆ The Girl Child in Crisis - Azim Sherwani
- ◆ Misuse of Technologies for Sex selection: Imperative for Stringent regulation of assisted reproductive Technologies - Dr Sabu M. George, CWDS, New Delhi.
- ◆ National Population policy (NPP) 2000
- ◆ Common Minimum Programme of the United Progressive Alliance / May 2004
- ◆ Death wish for Daughters - Sangeetha Krishna, Manushi - Issue 131
- ◆ Sex Selection and the new paradigm of development - Dr Vibhuti Patel
- ◆ Female Foeticide or Crime against humanity - Kalpana Kannabiran

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Notes

Female foeticide/infanticide is said to match and even surpass some of the worst crimes of genocides in the world in overall scale. Consider the fact of 15 lakh girls in 0-6 age group who have been denied survival in the last six years alone. So also the fact of 1 lakh female foetuses aborted after sex determination in just the last three years. They are a reflection of the gender bias and the degraded status of women owing to patriarchy. The result is violence on little girls born and unborn.

The child sex ratio of 927 females for 1000 males in 0-6 age group, of the census 2001 hit the public eye. It meant a deficit of 60 lakh infants and girls in the total population of 15.8 crores of infants and children in that age group in 2001. The major reason for this was identified as the practice of female foeticide/infanticide widespread in most of the states. With this the issue came up for much discussion and debate in many noted circles, among professionals and activists. There have been many arguments against this crime and in favour of it.

Mahila Jagruthi, an organisation in Karnataka committed to the cause of women has also taken up cudgels against it as the phenomenon has serious long-term social ramifications. And being a part of the Committee Against Violence On Women (CAVOW), it is actively involved in campaigns and protests over the issue. The author, Lalitha, a psychologist, is one of the founder members and activists of Mahila Jagruthi.

The booklet is a part of our efforts to address the debate, sharpen the campaign and struggle. It compiles various information available on the gory trade of female foeticide and practice of female infanticide on the one hand. On the other it seeks to analyse the larger socio-economic dimensions that contribute to the continued and increasing pattern of eliminating girl children. The booklet, we hope, will serve as an aid to social activists and be of interest to students, academicians and institutions concerned about the issue.